








		SIBA TESTING SERVICES Merit – Transparency – Technology	
Candidate Copy District & Sessions Court, Umerkot			
Branch Code: _____		Date: _____	
Branch Name: _____			
	Allied Bank Limited	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1203-00100-4907216-0015		
	MCB Bank Limited	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1853 – 1159209-46100-0280		
Bar Code & Reference #	 8 7 8 9 6 5 6 6 9 4 6 6 3		
Last Date of Fees Submission	March 31, 2020		
Deposit ID	DSCU0103		
Mr./Ms.			
S/d/w/o			
CNIC #			
Post Applied for			
Total Fee	Amount in words:		
700/-	Rupee(s): Seven Hundred Only		
	Non-Refundable / Non-Transferable		
Applicant Signature	Cashier	Officer	

		SIBA TESTING SERVICES Merit – Transparency – Technology	
STS Copy (to be attached with form) District & Sessions Court, Umerkot			
Branch Code: _____		Date: _____	
Branch Name: _____			
	Allied Bank Limited	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1203-00100-4907216-0015		
	MCB Bank Limited	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1853 – 1159209-46100-0280		
Bar Code & Reference #	 8 7 8 9 6 5 6 6 9 4 6 6 3		
Last Date of Fees Submission	March 31, 2020		
Deposit ID	DSCU0103		
Mr./Ms.			
S/d/w/o			
CNIC #			
Post Applied for			
Total Fee	Amount in words:		
700/-	Rupee(s): Seven Hundred Only		
	Non-Refundable / Non-Transferable		
Applicant Signature	Cashier	Officer	

		SIBA TESTING SERVICES Merit – Transparency – Technology	
Bank Copy District & Sessions Court, Umerkot			
Branch Code: _____		Date: _____	
Branch Name: _____			
	Allied Bank Limited	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1203-00100-4907216-0015		
	MCB Bank Limited	<input type="checkbox"/>	
A/C Title:	SIBA TESTING SERVICES		
A/C #:	1853-115920946-1000280		
Bar Code & Reference #	 8 7 8 9 6 5 6 6 9 4 6 6 3		
Last Date of Fees Submission	March 31, 2020		
Deposit ID	DSCU0103		
Mr./Ms.			
S/d/w/o			
CNIC #			
Post Applied for			
Total Fee	Amount in words:		
700/-	Rupee(s): Seven Hundred Only		
	Non-Refundable / Non-Transferable		
Applicant Signature	Cashier	Officer	